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## BIB DATA SHEET

CONFIRMATION NO. 5602

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/725,473	12/03/2003	435	1647	67824.407404
<b>APPLICANTS</b> Mark Zoller, San Diego, CA; Xiaodong Li, San Diego, CA; Lena Staszewski, San Diego, CA; Shawn O'Connell, Encinitas, CA; Sergey Zozulya, San Diego, CA; Jon Elliot Adler, San Diego, CA; Hong Xu, San Diego, CA; Fernando Echeverri, Chula Vista, CA; which is a CIP of 10/035,045 03/03/2002 PAT 7,241,880 and a CIP of 09/897,427 07/03/2001 PAT 6,955,887 and a CIP of 09/799,629 03/07/2001 PAT 7,244,835 10/179,373 claims benefit of 60/300,434 06/26/2001				
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/179,373 06/26/2002 PAT 7,368,285 which claims benefit of 60/300,434 06/26/2001 and claims benefit of 60/304,749 07/13/2001 and claims benefit of 60/310,493 08/08/2001 and claims benefit of 60/331,771 11/21/2001 and claims benefit of 60/339,472 12/14/2001 and claims benefit of 60/372,090 04/15/2002 and claims benefit of 60/374,143 04/22/2002 none RL 4/13/09				
<b>** FOREIGN APPLICATIONS *****</b> none RL 4/13/09				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 01/13/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /ROBERT S LANDSMAN/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 15	<b>TOTAL CLAIMS</b> 40
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> HUNTON & WILLIAMS LLP INTELLECTUAL PROPERTY DEPARTMENT 1900 K STREET, N.W. SUITE 1200 WASHINGTON, DC 20006-1109 UNITED STATES				
<b>TITLE</b> RECOMBINANT METHODS FOR EXPRESSING A FUNCTIONAL UMAMI (T1R1/T1R3) TASTE RECEPTOR				
<b>FILING FEE RECEIVED</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	

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No. \_\_\_\_\_ for following:

☐ 1.18 Fees (Issue)☐ Other \_\_\_\_\_☐ Credit